



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		77551.35
(b) Cash on Hand at Beginning of Reporting Period.....	75312.41	
(c) Total Receipts (from Line 19) .....	7626.46	32868.33
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	82938.87	110419.68
7. Total Disbursements (from Line 31).....	5833.54	33314.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	77105.33	77105.33
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Regeneron Pharmaceuticals, Inc. PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7122.92	27991.34
(ii) Unitemized .....	70.00	2262.64
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7192.92	30253.98
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7192.92	30253.98
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	433.54	2614.35
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7626.46	32868.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7626.46	32868.33

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	433.54	2614.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	433.54	2614.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5400.00	30700.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5833.54	33314.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5833.54	33314.35

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7192.92	30253.98
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7192.92	30253.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	433.54	2614.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	433.54	2614.35
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Keith Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Regeneron Pharmaceuticals Inc. Occupation Sr. Staff Scientist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 24 / 2016**  
**Transaction ID : SA11AI.4704**  
 Amount of Each Receipt this Period **50.00**  
 Memo Item  
 \$25.00 Bi-weekly payroll deduction

**B. Ned Braunstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Regeneron Pharmaceuticals Inc. Occupation Sr. VP - Regulatory Affairs  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2499.90**

Date of Receipt **06 / 24 / 2016**  
**Transaction ID : SA11AI.4715**  
 Amount of Each Receipt this Period **384.60**  
 Memo Item  
 \$192.30 Bi-weekly payroll deduction

**C. Scott Carver**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP- Clinical Scale Mfg. & Sciences  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1249.95**

Date of Receipt **06 / 24 / 2016**  
**Transaction ID : SA11AI.4705**  
 Amount of Each Receipt this Period **192.30**  
 Memo Item  
 \$96.15 Bi-weekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>626.90</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Christopher Daly**  
Full Name (Last, First, Middle Initial)  
Mailing Address 777 Old Saw Mill River Road  
City Tarrytown State NY Zip Code 10591  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Regeneron Pharmaceuticals Inc. Occupation Director - Oncology & Angiogenesis  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1249.95

Date of Receipt 06 / 24 / 2016  
**Transaction ID : SA11AI.4703**  
Amount of Each Receipt this Period 192.30  
 Memo Item  
\$96.15 Bi-weekly payroll deduction

**B. Jeanette Fairhurst**  
Full Name (Last, First, Middle Initial)  
Mailing Address 777 Old Saw Mill River Road  
City Tarrytown State NY Zip Code 10591  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Regeneron Pharmaceuticals Inc. Occupation Senior Manager-Therapeutic Antibodies  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 24 / 2016  
**Transaction ID : SA11AI.4712**  
Amount of Each Receipt this Period 100.00  
 Memo Item  
\$50.00 Bi-weekly payroll deduction

**C. Chris Fenimore**  
Full Name (Last, First, Middle Initial)  
Mailing Address 777 Old Saw Mill River Road  
City Tarrytown State NY Zip Code 10591  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP - Financial Planning  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1249.95

Date of Receipt 06 / 24 / 2016  
**Transaction ID : SA11AI.4710**  
Amount of Each Receipt this Period 192.30  
 Memo Item  
\$96.15 Bi-weekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	484.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

Full Name (Last, First, Middle Initial)  
**A. Gregory Geba**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP Deputy Head - Clinical Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **499.98**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4717**

Amount of Each Receipt this Period **76.92**

Memo Item  
\$38.46 Bi-weekly payroll deduction

Full Name (Last, First, Middle Initial)  
**B. Patrice Gilooly**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP - QA & Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1249.95**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4718**

Amount of Each Receipt this Period **192.30**

Memo Item  
\$96.15 Bi-weekly payroll deduction

Full Name (Last, First, Middle Initial)  
**C. Joseph LaRosa**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation Sr. VP - General Counsel & Secretary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4707**

Amount of Each Receipt this Period **384.60**

Memo Item  
\$192.30 Bi-weekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... **653.82**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

Full Name (Last, First, Middle Initial)  
**A. Scott Mellis**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP - Clinical Sciences Trans. Medicine

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4702**

Amount of Each Receipt this Period **384.60**

Memo Item  
\$192.30 Bi-weekly payroll deduction

Full Name (Last, First, Middle Initial)  
**B. Hala Mirza**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP - Corporate Communications

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4701**

Amount of Each Receipt this Period **384.60**

Memo Item  
\$192.30 Bi-weekly payroll deduction

Full Name (Last, First, Middle Initial)  
**C. Andrew Murphy**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation Sr. VP - Research Regeneron Labs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4721**

Amount of Each Receipt this Period **384.60**

Memo Item  
\$192.30 Bi-weekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... **1153.80**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. William Olson**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP - Research & Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4706**

Amount of Each Receipt this Period **384.60**

Memo Item  
\$192.30 Bi-weekly payroll deduction

**B. Christine Poon**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Independent Director Occupation Independent Director, Board of Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **3000.00**

Date of Receipt **06 / 13 / 2016**

**Transaction ID : SA11AI.4722**

Amount of Each Receipt this Period **3000.00**

Memo Item

**c. Tor Smeland**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation Exec. Dir. - Assistant General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2499.90**

Date of Receipt **06 / 24 / 2016**

**Transaction ID : SA11AI.4714**

Amount of Each Receipt this Period **384.60**

Memo Item  
\$192.30 Bi-weekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... **3769.20**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Robert Vitti**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation VP Clinical Sciences - Ophthalmology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.95

Date of Receipt 06 / 24 / 2016  
Transaction ID : SA11AI.4720

Amount of Each Receipt this Period 192.30

Memo Item  
\$96.15 Bi-weekly payroll deduction

**B. Mark Volpe**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation Vice President - Taxes

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.95

Date of Receipt 06 / 24 / 2016  
Transaction ID : SA11AI.4708

Amount of Each Receipt this Period 192.30

Memo Item  
\$96.15 Bi-weekly payroll deduction

**C. Stephen Westing**  
Full Name (Last, First, Middle Initial)

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C**

Name of Employer Regeneron Pharmaceuticals Inc. Occupation Dir. Med Aff. - Ophthalmology Sciences

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 24 / 2016  
Transaction ID : SA11AI.4719

Amount of Each Receipt this Period 50.00

Memo Item  
\$25.00 Bi-weekly payroll deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	434.60
<b>TOTAL</b> This Period (last page this line number only).....	7122.92

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Regeneron Pharmaceuticals, Inc. PAC**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

FEC ID number of contributing federal political committee. **C** C00562264

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 433.54

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016

**Transaction ID : SA15.4724**

Amount of Each Receipt this Period  
 433.54

Memo Item  
 Reimbursement of Expenses - Bank fees

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	433.54
<b>TOTAL</b> This Period (last page this line number only).....▶	433.54

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

Full Name (Last, First, Middle Initial)

### A. JP Morgan Chase Bank, NA

Mailing Address Two Corporate Drive

City Shelton State CT Zip Code 06484

Purpose of Disbursement  
Bank fees

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2016

Transaction ID : SB21B.4730

Amount of Each Disbursement this Period

433.54
--------

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

433.54
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433.54
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. ANNA ESHOO FOR CONGRESS**

Mailing Address 555 CAPITOL MALL, SUITE 1425

City State Zip Code  
SACRAMENTO CA 95814

Purpose of Disbursement  
Political contribution

011

Candidate Name

**ANNA ESHOO FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 18

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

Transaction ID : **SB23.4727**

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. RICHARD BURR COMMITTEE; THE**

Mailing Address POST OFFICE BOX 5928

City State Zip Code  
WINSTON-SALEM NC 27113

Purpose of Disbursement  
Political contribution

011

Candidate Name

**RICHARD BURR COMMITTEE; THE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NC District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2016

Transaction ID : **SB23.4725**

Amount of Each Disbursement this Period

2700.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5400.00

**TOTAL** This Period (last page this line number only)..... ▶

5400.00